

family which later adopted him or her. The initial placement could have been for the purpose of adoption or for the purpose of foster care.

Non-Relative—Adoptive parent fits into none of the categories above.

VII. Placement Information

A. Child Was Placed From: Indicate the location of the individual or agency that had custody or responsibility for the child at the time of initiation of adoption proceedings.

Within State or Tribal service area—Responsibility for the child resided with an individual or agency within the State or service area of the Tribal title IV–E agency filing the report.

Another State or Tribal service area—Responsibility for the child resided with an individual or agency in another State, Tribal service area, or territory of the United States.

Another Country—Immediately prior to the adoptive placement, the child was residing in another country and was not a citizen of the United States.

B. Child Was Placed By: Indicate the individual or agency which placed the child for adoption.

Public Agency—A unit of State or local government.

Private Agency—A for-profit or non-profit agency or institution.

Tribal Agency—A unit within one of the federally recognized Indian Tribes, Indian Tribal organizations, or Indian Tribal consortia.

Independent Person—A doctor, a lawyer or some other individual.

Birth Parent—The parent(s) placed the child directly with the Adoptive parent(s).

VIII. Adoption Support

A. Is The Child Receiving a Monthly Subsidy?

Enter “yes” if this child was adopted with an adoption assistance agreement under which regular subsidies (Federal, State, or Tribal) are paid.

B. Monthly Amount—Indicate the monthly amount of the subsidy. The amount of the subsidy should be rounded to the nearest dollar. Indicate “0” if the subsidy includes only benefits under titles XIX or XX of the Social Security Act.

C. If VIII.A is “Yes,” is Child Receiving Title IV–E Adoption Subsidy?

If VIII.A is “yes,” indicate whether the subsidy is claimed by the title IV–E agency for reimbursement under title IV–E. Do not include title IV–E non-recurring costs in this item.

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APPENDIX C TO PART 1355—ELECTRONIC DATA TRANSMISSION FORMAT

All AFCARS data to be sent from title IV–E agencies to the Department are to be in electronic form. In order to meet this general specification, the Department will offer as much flexibility as possible. Technical assistance will be provided to negotiate a method of transmission best suited to the title IV–E agency’s environment.

There will be four semi-annual electronic data transmissions from the title IV–E agency to the Administration for Children and Families (ACF).

Regardless of the electronic data transmission methodology selected, certain criteria must be met by the title IV–E agency:

(1) Records must be written using ASCII standard character format.

(2) All elements must be comprised of integer (numeric) value(s). Element character length specifications refer to the maximum number of numeric values permitted for that element. See Appendix D.

(3) All records must be a fixed length. The Foster Care Detailed Data Elements Record is 150 characters long and the Adoption Detailed Data Elements Record is 72 characters long. The Foster Care Summary Data Elements Record and the Adoption Summary Data Elements Record are each 172 characters long.

(4) All title IV–E agencies must inform the Department, in writing, of the method of transfer they intend to use.

[77 FR 934, Jan. 6, 2012]

APPENDIX D TO PART 1355—FOSTER CARE AND ADOPTION RECORD LAYOUTS

A. Foster Care

1. Foster Care Semi-Annual Detailed Data Elements Record

a. The record will consist of 66 data elements.

b. Data must be supplied for each of the elements in accordance with these instructions:

(1) All data must be numeric. Enter the appropriate value for each element.

(2) Enter date values in year, month and day order (YYYYMMDD), e.g., 19991030 for October 30, 1999, or year and month order (YYMM), e.g., 199910 for October 1999. Leave the element value blank if dates are not applicable.

(3) For elements 8, 11–15, 26–40, 52, 54 and 59–65, which are “select all that apply” elements, enter a “1” for each element that applies, enter a zero for non-applicable elements.

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(4) Transaction Date—is a computer generated date indicating when the datum (Elements 21 or 55) is entered into the title IV-E agency's automated information system.

(5) Report the status of all children in foster care as of the last day of the reporting period. Also, provide data for all children

who were discharged from foster care at any time during the reporting period, or in the previous reporting period, if not previously reported.

c. Foster Care Semi-Annual Detailed Data Elements Record Layout follows:

| Element No. | Appendix A data element | Data element description | Number of numeric characters |
|-------------|-------------------------|--|------------------------------|
| 01 | I.A | Title IV-E agency | 2 |
| 02 | I.B | Report period ending date | 6 |
| 03 | I.C | Local Agency FIPS code (county or equivalent jurisdiction) or other ACF assigned code. | 5 |
| 04 | I.D | Record number | 12 |
| 05 | I.E | Date of most recent periodic review | 8 |
| 06 | II.A | Child's date of birth | 8 |
| 07 | II.B | Sex | 1 |
| 08 | II.C.1 | Race. | |
| 08a | | American Indian or Alaska native | 1 |
| 08b | | Asian | 1 |
| 08c | | Black or African American | 1 |
| 08d | | Native Hawaiian or Other Pacific Islander | 1 |
| 08e | | White | 1 |
| 08f | | Unable to Determine | 1 |
| 09 | II.C.2 | Hispanic or Latino Ethnicity | 1 |
| 10 | II.D | Has this child been clinically diagnosed as having a disability(ies). Indicate each type of disability of the child with a "1" for elements 11–15 and a zero for disabilities that do not apply. | 1 |
| 11 | II.D.1.a | Mental retardation | 1 |
| 12 | II.D.1.b | Visually or hearing impaired | 1 |
| 13 | II.D.1.c | Physically disabled | 1 |
| 14 | II.D.1.d | Emotionally disturbed (DSM III) | 1 |
| 15 | II.D.1.e | Other medically diagnosed condition requiring special care | 1 |
| 16 | II.E.1 | Has this child ever been adopted | 1 |
| 17 | II.E.2 | If yes, how old was the child when the adoption was legalized? | 1 |
| 18 | III.A.1 | Date of first removal from home | 8 |
| 19 | III.A.2 | Total number of removals from home to date | 2 |
| 20 | III.A.3 | Date child was discharged from last foster care episode | 8 |
| 21 | III.A.4 | Date of latest removal from home | 8 |
| 22 | III.A.5 | Removal transaction date | 8 |
| 23 | III.B.1 | Date of placement in current foster care setting | 8 |
| 24 | III.B.2 | Number of previous placement settings during this removal episode. | 2 |
| 25 | IV.A | Manner of removal from home for current placement episode. Actions or conditions associated with child's removal: Indicate with a "1" for elements 26–40 and a zero for conditions that do not apply. | 1 |
| 26 | IV.B.1 | Physical abuse (alleged/reported) | 1 |
| 27 | IV.B.2 | Sexual abuse (alleged/reported) | 1 |
| 28 | IV.B.3 | Neglect (alleged/reported) | 1 |
| 29 | IV.B.4 | Alcohol abuse (parent) | 1 |
| 30 | IV.B.5 | Drug abuse (parent) | 1 |
| 31 | IV.B.6 | Alcohol abuse (child) | 1 |
| 32 | IV.B.7 | Drug abuse (child) | 1 |
| 33 | IV.B.8 | Child's disability | 1 |
| 34 | IV.B.9 | Child's behavior problem | 1 |
| 35 | IV.B.10 | Death of parent(s) | 1 |
| 36 | IV.B.11 | Incarceration of parent(s) | 1 |
| 37 | IV.B.12 | Caretaker's inability to cope due to illness or other reasons | 1 |
| 38 | IV.B.13 | Abandonment | 1 |
| 39 | IV.B.14 | Relinquishment | 1 |
| 40 | IV.B.15 | Inadequate housing | 1 |
| 41 | V.A | Current placement setting | 1 |
| 42 | V.B | Out of State/Tribal service area placement | 1 |
| 43 | VI | Most recent case plan goal | 1 |
| 44 | VII.A | Caretaker family structure | 1 |
| 45 | VII.B.1 | Year of birth (1st principal caretaker) | 4 |
| 46 | VII.B.2 | Year of birth (2nd principal caretaker) | 4 |
| 47 | VIII.A | Date of mother's parental rights termination | 8 |
| 48 | VIII.B | Date of legal or putative father's parental rights | 8 |

| Element No. | Appendix A data element | Data element description | Number of numeric characters |
|-------------|-------------------------|---|------------------------------|
| 49 | IX.A | Foster family structure | 1 |
| 50 | IX.B.1 | Year of birth (1st foster caretaker) | 4 |
| 51 | IX.B.2 | Year of birth (2nd foster caretaker) | 4 |
| 52 | IX.C.1 | Race of 1st foster caretaker. | |
| 52a ..... | ..... | American Indian or Alaska Native | 1 |
| 52b ..... | ..... | Asian | 1 |
| 52c ..... | ..... | Black or Asian American | 1 |
| 52d ..... | ..... | Native Hawaiian or Other Pacific Islander | 1 |
| 52e ..... | ..... | White | 1 |
| 52f ..... | ..... | Unable to Determine | 1 |
| 53 | IX.C.2 | Hispanic or Latino ethnicity of 1st foster caretaker | 1 |
| 54 | IX.C.3 | Race of 2nd foster caretaker. | |
| 54a ..... | ..... | American Indian or Alaska Native | 1 |
| 54b ..... | ..... | Asian | 1 |
| 54c ..... | ..... | Black or African American | 1 |
| 54d ..... | ..... | Native Hawaiian or Other Pacific Islander | 1 |
| 54e ..... | ..... | White | 1 |
| 54f ..... | ..... | Unable to Determine | 1 |
| 55 | IX.C.4 | Hispanic or Latino ethnicity of 2nd foster caretaker | 1 |
| 56 | X.A.1 | Date of discharge from foster care | 8 |
| 57 | X.A.2 | Foster care discharge transaction date | 8 |
| 58 | X.B | Reason for discharge | 1 |
| | | Sources of Federal support/assistance for child; indicate with a "1" for elements 58–64 and a zero for sources that do not apply. | |
| 59 | XI.A | Title IV–E (Foster Care) | 1 |
| 60 | XI.B | Title IV–E (Adoption Assistance) | 1 |
| 61 | XI.C | Title IV–A (Aid to Families With Dependent Children) | 1 |
| 62 | XI.D | Title IV–D (Child Support) | 1 |
| 63 | XI.E | Title XIX (Medicaid) | 1 |
| 64 | XI.F | SSI or other Social Security Act benefits | 1 |
| 65 | XI.G | None of the above | 1 |
| 66 | XII | Amount of monthly foster care payment (regardless of source). | 5 |
| | | Total characters | 197 |

2. Foster Care Semi-Annual Summary Data Elements Record

a. The record will consist of 22 data elements.

The values for these data elements are generated by processing all records in the semi-annual detailed data transmission and computing the summary values for Elements 1 and 3–22. Element 2 is the semi-annual report period ending date. In calculating the age range for the child, the last day of the reporting period is to be used.

b. Data must be supplied for each of the elements in accordance with these instructions:

(1) Enter the appropriate value for each element.

(2) For all elements where the total is zero, enter a numeric zero.

(3) Enter date values in year, month order (YYYYMM), e.g., 199912 for December 1999.

c. Foster Care Semi-Annual Summary Data Elements Record Layout follows:

| Element No. | Summary data file | Number of characters |
|-------------|--|----------------------|
| 01 | Number of records | 8 |
| 02 | Report period ending date (YYYYMM) | 6 |
| 03 | Children in care under 1 year | 8 |
| 04 | Children in care 1 year old | 8 |
| 05 | Children in care 2 years old | 8 |
| 06 | Children in care 3 years old | 8 |
| 07 | Children in care 4 years old | 8 |
| 08 | Children in care 5 years old | 8 |
| 09 | Children in care 6 years old | 8 |
| 10 | Children in care 7 years old | 8 |
| 11 | Children in care 8 years old | 8 |
| 12 | Children in care 9 years old | 8 |
| 13 | Children in care 10 years old | 8 |
| 14 | Children in care 11 years old | 8 |
| 15 | Children in care 12 years old | 8 |
| 16 | Children in care 13 years old | 8 |

| Element No. | Summary data file | Number of characters |
|-------------|--|----------------------|
| 17 | Children in care 14 years old | 8 |
| 18 | Children in care 15 years old | 8 |
| 19 | Children in care 16 years old | 8 |
| 20 | Children in care 17 years old | 8 |
| 21 | Children in care 18 years old | 8 |
| 22 | Children in care over 18 years old | 8 |
| | Record Length | 174 |

B. Adoption

1. Adoption Semi-Annual Detailed Data Elements Record

a. The record will consist of 37 data elements.

b. Data must be supplied for each of the elements in accordance with these instructions:

(1) Enter the appropriate value for each element.

(2) Enter date values in year, month and day order (YYYYMMDD), e.g., 19991030 for October 30, 1999, or year and month (YYYYMM), e.g., 199910 for October 1999. Leave the element value blank if dates are not applicable.

(3) For elements 7, 11–15, 25, 27 and 29–32 which are “select all that apply” elements, enter a “1” for each element that applies; enter a zero for non-applicable elements.

c. Adoption Semi-Annual Detailed Data Elements Record Layout follows:

| Element No. | Appendix B data element | Data element description | Number of numeric characters |
|-------------|-------------------------|--|------------------------------|
| 01 | IA | Title IV–E agency | 2 |
| 02 | IB | Report period ending date | 6 |
| 03 | IC | Record number | 6 |
| 04 | ID | Title IV–E agency involvement | 1 |
| 05 | II.A | Date of birth | 6 |
| 06 | II.B | Sex | 1 |
| 07 | II.C.1 | Race | |
| 07a | | American Indian or Alaska Native | 1 |
| 07b | | Asian | 1 |
| 07c | | Black or African American | 1 |
| 07d | | Native Hawaiian or Other Pacific Islander | 1 |
| 07e | | White | 1 |
| 07f | | Unable to Determine | 1 |
| 08 | II.C.2 | Hispanic or Latino ethnicity | 1 |
| 09 | III.A | Has the title IV–E agency determined that this child has special needs | 1 |
| 10 | III.B | Primary basis for special needs | 1 |
| | | Indicate a primary basis of special needs with a “1” for elements 11–15. Enter a zero for special needs that do not apply. | |
| 11 | III.B.1.a | Mental retardation | 1 |
| 12 | III.B.1.b | Visually or hearing impaired | 1 |
| 13 | III.B.1.c | Physically disabled | 1 |
| 14 | III.B.1.d | Emotionally disturbed (DSM III) | 1 |
| 15 | III.B.1.e | Other medically diagnosed condition requiring special care | 1 |
| 16 | IV.A.1 | Mother’s year of birth | 4 |
| 17 | IV.A.2 | Father’s (Putative or legal) year of birth | 4 |
| 18 | IV.B | Was the mother married at time of child’s birth | 1 |
| 19 | V.A.1 | Date of mother’s termination of parental rights | 8 |
| 20 | V.A.2 | Date of father’s termination of parental rights | 8 |
| 21 | V.B | Date adoption legalized | 8 |
| 22 | VI.A | Adoptive parents family structure | 1 |
| 23 | VI.B.1 | Mother’s year of birth (if applicable) | 4 |
| 24 | VI.B.2 | Father’s year of birth (if applicable) | 4 |
| 25 | VI.C.1 | Adoptive mother’s race | |
| 25a | | American Indian or Alaska Native | 1 |
| 25b | | Asian | 1 |
| 25c | | Black or African American | 1 |
| 25d | | Native Hawaiian or Other Pacific Islander | 1 |
| 25e | | White | 1 |
| 25f | | Unable to Determine | 1 |
| 26 | VI.C.2 | Hispanic or Latino Ethnicity | 1 |
| 27 | VI.C.3 | Adoptive father’s race | |
| 27a | | American Indian or Alaska Native | 1 |
| 27b | | Asian | 1 |

| Element No. | Appendix B data element | Data element description | Number of numeric characters |
|-------------|-------------------------|--|------------------------------|
| 27c ..... | ..... | Black or African American | 1 |
| 27d ..... | ..... | Native Hawaiian or Other Pacific Islander | 1 |
| 27e ..... | ..... | White | 1 |
| 27f ..... | ..... | Unable to Determine | 1 |
| 28 | VI.C.4 | Hispanic or Latino Ethnicity | 1 |
| | | Indicate each type of relationship of adoptive parent(s) to the child with a "1" for elements 29–32. Enter a zero for relationships that do not apply below. | |
| 29 | VI.D.1 | Stepparent | 1 |
| 30 | VI.D.2 | Other relative of child by birth or marriage | 1 |
| 31 | VI.D.3 | Foster parent of child | 1 |
| 32 | VI.D.4 | Other non-relative | 1 |
| 33 | VII.A | Child was placed from | 1 |
| 34 | VII.B | Child was placed by | 1 |
| 35 | VIII.A | Is this child receiving a monthly subsidy | 1 |
| 36 | VIII.B | If VIII.B is "yes." What is the monthly amount | 5 |
| 37 | VIII.C | If VII.B is "yes." Is the child receiving title IV–E adoption assistance? | 1 |
| | | Total Characters ..... | ..... |

2. Adoption Semi-Annual Summary Data Elements Record

a. The record will consist of 22 data elements.

The values for these data elements are generated by processing all records in the semi-annual detailed data transmission and computing the summary values for Elements 1 and 3–22. Element 2 is the semi-annual report period ending date. In calculating the age range for the child, the last day of the reporting period is to be used.

b. Data must be supplied for each of the elements in accordance with these instructions:

(1) Enter the appropriate value for each element.

(2) For all elements where the total is zero, enter a numeric zero.

(3) Enter data values in year, month order (YYYYMM), e.g., 199912 for December 1999.

c. Adoption Semi-Annual Summary Data Element Record Layout follows:

| Element No. | Summary data file | Number of characters |
|-------------|--|----------------------|
| 01 | Number of records | 8 |
| 02 | Report period ending date (YYYYMM) | 6 |
| 03 | Children adopted Under 1 year old | 8 |
| 04 | Children adopted 1 year old | 8 |
| 05 | Children adopted 2 years old | 8 |
| 06 | Children adopted 3 years old | 8 |
| 07 | Children adopted 4 years old | 8 |
| 08 | Children adopted 5 years old | 8 |
| 09 | Children adopted 6 years old | 8 |
| 10 | Children adopted 7 years old | 8 |
| 11 | Children adopted 8 years old | 8 |
| 12 | Children adopted 9 years old | 8 |
| 13 | Children adopted 10 years old | 8 |
| 14 | Children adopted 11 years old | 8 |
| 15 | Children adopted 12 years old | 8 |
| 16 | Children adopted 13 years old | 8 |
| 17 | Children adopted 14 years old | 8 |
| 18 | Children adopted 15 years old | 8 |
| 19 | Children adopted 16 years old | 8 |
| 20 | Children adopted 17 years old | 8 |
| 21 | Children adopted 18 years old | 8 |
| 22 | Children adopted over 18 years old | 8 |
| | Record Length | 174 |

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APPENDIX E TO PART 1355—DATA
STANDARDS

All data submissions will be evaluated to determine the completeness and internal consistency of the data. Four types of assessments will be conducted on both the foster care and adoption data submissions. The results of these assessments will determine the applicability of a substantial noncompliance determination with the title IV-E plan.

The four types of assessments are:

- Comparisons of the detailed data to summary data;
- Internal consistency checks of the detailed data;
- An assessment of the status of missing data; and
- Timeliness, an assessment of how current the submitted data are.

A. Foster Care

1. Summary Data Elements Submission
Standards

A summary file must accompany the Detailed Data Elements submission. Both transmissions must be sent through electronic means (see appendix C for details). This summary will be used to verify basic counts of records on the detailed data received.

a. The summary file must be a discrete file separate from the semi-annual reporting period detailed data file. The record layout for the summary file is included in appendix D, section A.2.c. All data must be included. If the value for a numeric field is zero, zero must be entered.

b. The Department will develop a second summary file by computing the values from the detailed data file received from the title IV-E agency. The two summary files (the one submitted by the title IV-E agency and the one created during Federal processing) will be compared, field by field. If the two files match, further validation of the detailed data elements will commence. If the two summary files do not match, we will assume that there has been an error in transmission and will request a retransmission from the title IV-E agency within 24 hours of the time the title IV-E agency has been notified. In addition, a log of these occurrences will be kept as a means of cataloging problems and offering suggestions on improved procedures.

2. Detailed Data File Submission Standards

a. Internal Consistency Validations.

Internal consistency validations involve evaluating the logical relationships between data elements in a detailed record. For example, a child cannot be discharged from foster care before he or she has been removed

from his or her home. Thus, the Date of Latest Removal From Home data element must be a date prior to the Date of Discharge. If this is not the case, an internal inconsistency will be detected and an "error" indicated in the detailed data file.

A number of data elements have "if applicable" contingency relationships with other data elements in the detailed record. For example, if the Foster Family Structure has only a single parent, then the appropriate sex of the Single Female/Male element in the "Year of Birth" and "Race/Origin" elements must be completed and the "non-applicable" fields for these elements are to be filled with zero's or, for dates, left blank.

The internal consistency validations that will be performed on the foster care detailed data are as follows:

(1) The Local Agency must be the county or a county equivalent unit which has responsibility for the case. The 5 digit Federal Information Processing Standard (FIPS) or other ACF assigned code must be used.

(2) If Date of Latest Removal From Home (Element 21) is less than nine months prior to the Report Period Ending Date (Element 2) then the Date of Most Recent Periodic Review (Element 5) may be left blank.

(3) If Date of Latest Removal From Home (Element 21) is greater than nine months from Report Date (Element 2) then the Date of Most Recent Periodic Review (Element 5) must not be more than nine months prior to the Report Date (Element 2).

(4) If a child is identified as having a disability(ies) (Element 10), at least one Type of Disability Condition (Elements 11-15) must be indicated. Enter a zero (0) for disabilities that do not apply.

(5) If the Total Number of Removals From Home to Date (Element 19) is one (1), the Date Child was Discharged From Last Foster Care Episode (Element 20) must be blank.

(6) If the Total Number of Removals From Home to Date (Element 19) is two or more, then the Date Child was Discharged From Last Foster Care Episode (Element 20) must not be blank.

(7) If Date Child was Discharged From Last Foster Care Episode (Element 20) exists, then this date must be a date prior to the Date of Latest Removal From Home (Element 21).

(8) The Date of Latest Removal From Home (Element 21) must be prior to the Date of Placement in Current Foster Care Setting (Element 23).

(9) At least one element between elements 26 and 40 must be answered by selecting a "1". Enter a zero (0) for conditions that do not apply.

(10) If Current Placement Setting (Element 41) is a value that indicates that the child is not in a foster family or a pre-adoptive home, then elements 49-55 must be zero (0).

(11) At least one element between elements 59 and 65 must be answered by selecting a